

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO. \_\_\_\_\_

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH AND ADDICTION SERVICES  
BUREAU OF HEALTH SYSTEM REGULATION  
DIVISION OF MEDICAL QUALITY ASSURANCE

*Rec'd*  
*3/22/94*  
*JS*

In re: Adele Robin Mazzacane, H.C.

Petition No. 940215-20-003

PRELICENSURE CONSENT ORDER

*DA*  
*3/23/94*  
*JS*

WHEREAS, Adele Robin Mazzacane, of Southbury, Connecticut (hereinafter "respondent") has been issued license number 037654 to practice the occupation of hairdresser and cosmetician by the Department of Public Health and Addiction Services (hereinafter "the Department") pursuant to Chapter 387 of the Connecticut General Statutes, as amended; and,

WHEREAS, respondent's license lapsed in November 1990, and respondent has now applied to have said license reinstated by the Department pursuant to Chapter 368a of the Connecticut General Statutes, as amended; and,

WHEREAS, respondent hereby admits and acknowledges that:

1. From November 1990 until February, 1992 she practiced the occupation of hairdresser and cosmetician at New Wave Designs of Brookfield, Connecticut, and from March 1992 through September 1993 at Guys and Dolls, Brookfield, Connecticut.
2. On November 10, 1992, she was arrested for violation of Connecticut General Statutes §21a-279(a), §21a-279(c), and §14-217, for which she was granted accelerated rehabilitation pursuant to Connecticut General Statutes §54-56e.

3. The conduct described in paragraphs 1 and 2 above fails to conform to the accepted standards of the occupation of hairdresser and cosmetician in violation of Connecticut General Statutes §20-263.

NOW THEREFORE, pursuant to §§19a-17 and 20-263 of the Connecticut General Statutes, as amended, respondent hereby stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations applicable to her profession.
3. When she satisfies the requirements for licensure as a hairdresser and cosmetician as set forth in chapter 387 of the Connecticut General Statutes, her license to practice as a hairdresser and cosmetician will be reinstated.
4. Her license to practice as a hairdresser and cosmetician shall be immediately placed on probation for three (3) years, subject to the following terms and conditions:

A. She shall pay a civil penalty of one hundred (\$100.00) dollars by certified or cashier's check payable to "Treasurer, State of Connecticut". Said civil penalty shall be payable at the time respondent submits the executed Prelicensure Consent Order to the Department.

B. She shall engage in therapy at her own expense with a licensed therapist, approved by the Department (hereinafter "therapist"),

(1) She shall provide a copy of this Prelicensure Consent Order to her therapist. *certified, marital, Family therapist or certified Ind. Social worker*

(2) Her therapist shall furnish written confirmation to the Department of his or her engagement in that capacity and receipt of a copy of this Prelicensure Consent Order within fifteen (15) days of the effective date of this Prelicensure Consent Order.

(3) If respondent's therapist determines that therapy is no longer therapeutically necessary, that a reduction in frequency of therapy sessions is warranted, or that respondent should be transferred to another therapist, he or she shall advise the Department, and the Department shall pre-approve said termination of therapy, reduction in frequency of therapy sessions and/or respondent's transfer to another therapist. However, if therapy is terminated with approval of the Department, respondent's therapist shall continue to monitor her alcohol and drug free status by monitoring and reviewing the observed random urine screens for drugs and alcohol as described in paragraph 4C below, and by providing the reports described in paragraph 4D below.

(4) The therapist shall immediately notify the Department in writing if respondent discontinues therapy and/or terminates his or her services.

C. Respondent shall not obtain for personal use and/or use alcohol, controlled substances or legend drugs that have not been prescribed for her for a legitimate therapeutic purpose by a licensed physician.

(1) At her own expense, she shall submit to observed random urine screens for controlled substances and alcohol at a testing facility approved by the Department as ordered by her therapist. She shall also be responsible for providing laboratory reports reporting the results of such screens directly to her therapist. All such observed random drug and alcohol screens and laboratory reports shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening process.

- (2) She shall be responsible for notifying the laboratory, her therapist and the Department of any controlled substances she is taking.
- (3) There must be at least one such observed random screen and accompanying laboratory report weekly for the first six (6) months of probation, at least one such screen and report every two weeks for the second six (6) months of probation, and at least one such screen and report quarterly for the second and third years of probation.
- (4) All screens shall be negative for controlled substances and alcohol.
- (5) All positive screen results shall be confirmed by gas chromatograph/mass spectrometer testing.
- (6) Respondent is hereby advised that the ingestion of poppy seeds has, from time to time, been raised as a defense to a positive screen result for morphine and/or opiates. For that reason, respondent agrees to refrain from ingesting poppy seeds in any food substances during the term of this Preliminary Consent Order. In the event respondent has a positive screen for morphine and/or opiates, respondent agrees that the ingestion of poppy seeds shall not constitute a defense to such a screen.

D. Respondent shall be responsible for the provision of written reports from her therapist directly to the Department monthly for the first year of her probationary period, and quarterly for the second and third years of probation. Such reports shall include documentation of dates of treatment, an evaluation of respondent's progress in treatment and of her drug and alcohol free status as established by the observed random urine screens for drugs and alcohol described in paragraph 4C(1), an evaluation of her ability to safely and competently practice the occupation of hairdresser and cosmetician, and copies of all laboratory reports.

- E. Notwithstanding the foregoing, respondent's therapist shall immediately report to the Department any confirmed positive urine screen and any conduct or condition on respondent's part which does or may violate any federal or state statute or regulation applicable to her profession.
- F. Respondent shall provide a copy of this Prelicensure Consent Order to all current and future employers for the duration of her probation.
- G. Respondent shall be responsible for the provision of written reports directly to the Department from her employer monthly for the first year of her probation, and quarterly for the second and third years of probation. Employer reports shall include documentation of respondent's ability to safely and competently practice the occupation of hairdresser and cosmetician, and shall be issued to the Department at the address cited in paragraph 4K below.
- H. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.
- I. Respondent shall notify the Department of any change in her home or business address within fifteen (15) days of such change.
- J. All reports required in paragraphs 4D and 4G are due according to the following schedule:
  - (1) Monthly reports are due on the tenth business day of every month commencing with the reports due on the tenth day of the first full month after the effective date of this Prelicensure Consent Order.
  - (2) Quarterly reports are due on the tenth business day of January, April, July and October. Quarterly reports shall commence with the report due on the tenth day of the first month of the first full quarter after the last monthly report is due.

K. All correspondence and reports shall be addressed to:

Lynne Hurley, Investigator  
Department of Public Health and Addiction Services  
Public Health Hearing Office  
150 Washington Street  
Hartford, CT 06106

5. Any deviation from the terms of this Prelicensure Consent Order without prior written approval by the Department shall constitute a violation. A violation of any term(s) of the Prelicensure Consent Order shall result in the right of the Department to immediately deem the respondent's hairdresser and cosmetician license rescinded. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to take action at a later time. The Department shall not be required to grant future extensions of time or grace periods. Notice of the rescission of the license shall be sent by the Department to respondent's address of record (most recent address reported to the Licensure and Registration Section of the Division of Medical Quality Assurance of the Department). Respondent waives any right to a hearing on the issue of violation of the terms of the Prelicensure Consent Order.
6. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Licensure and Renewal Section of the Division of Medical Quality Assurance of the Department.
7. This Prelicensure Consent Order is effective when approved and accepted by the duly appointed agent of the Department.
8. Respondent understands this Prelicensure Consent Order is a matter of public record.

9. Respondent understands this Preliminary Consent Order may be considered as evidence of the above admitted violations in any proceeding in which her compliance with §20-263 of the General Statutes of Connecticut, as amended, is at issue.
10. This Preliminary Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Preliminary Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that she may have under the laws of the State of Connecticut or of the United States.
11. This Preliminary Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department any time prior to its being executed by the last signatory.
12. Respondent has the right to consult with an attorney prior to signing this document.

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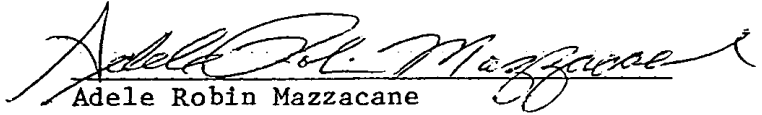
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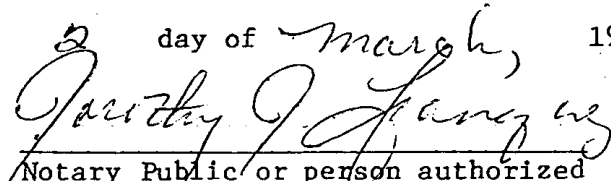
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I, Adele Robin Mazzacane have read the above Prelicensure Consent Order, and I agree and admit to the terms and allegations set forth therein. I further declare the execution of this Prelicensure Consent Order to be my free act and deed.

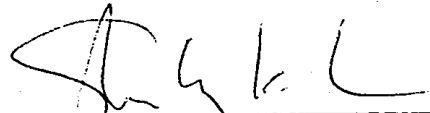
  
Adele Robin Mazzacane

Subscribed and sworn to before me this 2 day of March, 1994.

  
Notary Public or person authorized  
by law to administer an oath or  
affirmation

The above Prelicensure Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health and Addiction Services on

the 7<sup>th</sup> day of March 1994, it is hereby accepted.

  
Stanley K. Peck, Director  
Division of Medical Quality Assurance

RAS:cja  
9294Q/31-38  
2/94





# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH AND ADDICTION SERVICES BUREAU OF HEALTH SYSTEM REGULATION

January 30, 1996

Adele Robin Mazzacane  
255 Amos White Road  
Southbury, Connecticut 06488

Re: Prelicensure Consent Order  
Petition No. 940215-20-003  
License No. 037654

Dear Ms. Mazzacane:

The above-referenced Prelicensure Consent Order states that you "shall not obtain for personal use and/or use alcohol, controlled substances or legend drugs that have not been prescribed for [you] for a legitimate therapeutic purpose by a licensed physician."

This Department has been notified that on January 6, 1996 you tested positive for cocaine.

Paragraph 5 of the Order states that a "violation of any term(s) of the Prelicensure Consent Order shall result in the right of the Department to immediately deem the respondent's hairdresser and cosmetician license rescinded."

Please accept this letter as official notice that your Hairdresser and Cosmetician License No. 037654 is hereby rescinded.

Within ten (10) days of your receipt of this letter, please send all three copies of your license to my attention at the following address:

Department of Public Health  
Public Health Hearing Office  
150 Washington Street  
Hartford, Connecticut 06106

Very truly yours,

A handwritten signature in cursive script, appearing to read "Bonnie Pinkerton".

Bonnie Pinkerton  
Nurse Consultant  
Public Health Hearing Office

BEP  
1748Q/67  
1/96

cc: Paula Tomascak      Phone:      TDD: 203-566-1279  
Deb Tomassone      150 Washington Street — Hartford, CT 06106  
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